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Effective on 12/08/2004.				Complete if Known			
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).							
FEE TRANSMITTAL			Filing Date		June 27, 2001		
For FY 2009				ed Inventor			
			Examiner	0444			
Applicant claims small	entity status.	See 37 CFR 1.27	Art Unit		2444		
TOTAL AMOUNT OF PAYMEN	IT	(\$) 180.00	Attorney D	ocket No.	M1103.70784U	S00	
METHOD OF PAYMENT (check all that apply)							
Check X Credit Card Money Order Other (please identify):							
Deposit Account Deposit Account Number: 23/2825 Deposit Account Name: Wolf, Greenfield & Sacks, P.C.							
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)							
Charge fee(s)	indicated be	low		Charge fee(s) i	ndicated below, ex	cept for the filing fee	
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17							
FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
	FILIN		SEARCH FEE		INATION FEES		
Application Type	Fee (\$)	Small Entity Fee (\$) Fe	Small E e (\$) Fee (Small Entity) Fee (\$)	Fees Paid (\$)	
Utility	330		40 270		110	<u></u>	
Design	220	110 1	.00 50	0 140	70		
Plant	220	110 3	30 16:	5 170	85		
Reissue	330	165 5	40 27	0 650	325		
Provisional	220	110	0	0 0	0		
2. EXCESS CLAIM FEES						Small Entity	
Fee Description					Fee (\$) Fee (\$)	
Each claim over 20 (including Reissues)					52	26	
Each independent claim over 3 (including Reissues)					220	110	
Multiple dependent claims					390	195	
***************************************	ra Claims	Fee (\$)	Fee Paid (\$)		Multiple Dependent Claims		
- or HP = x = Fee (\$) HP = highest number of total claims paid for, if greater than 20.					ee Paid (\$)		
			Eoo Doid (\$\	_		, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Indep. Claims Ext	ra Claims x	<u>Fee (\$)</u> =	Fee Paid (\$)			1	
HP = highest number of independ			•				
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50							
sheets or fraction there				` ,			
	tra Sheets		ch additional 50			Fee Paid (\$)	
- 100 =	 	/50 =	(round up to	o a wnoie numbe	r) x ' =	Food Poid (A)	
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount)							
SUBMITTED BY Registration No. 33 050 Telephone 617 646 9000							
Signature C	$\lambda \lambda L$		(Attorney/Age	no. ent) 32,95	0 Telephone	617.646.8000	
Name (Print/Type) Edmund J. Weish Date April 20, 204							

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Certificate of Electronic Filing Under 37 CFR 1.8 I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being transmitted via the Office electronic filing							
system in accordance with § 1.6(a)(4).							
Dated: 4-20-1 (Signature: Lacu Mackeyer)						